

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/660,811	
	Filing Date	September 13, 2000	
	First Named Inventor	Mark S. Knighton	
	Group Art Unit	2131	
	Examiner Name		
Total Number of Pages in This Submission	66	Attorney Docket Number	04956P003

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div>PTO-1449 (3 pages) Return Receipt Postcard (1) References (57 refs.)</div>
Remarks		

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas M. Coester, Reg. No. 39,637 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
Signature	<i>Thomas Coester</i>
Date	December 11, 2000

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <b>December 11, 2000</b>			
Typed or printed name	Janet Kornbluth		
Signature	<i>Janet Kornbluth</i>	Date	12/11/00

**FEE TRANSMITTAL**  
**for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

**Complete if Known**

Application Number	09/660,811
Filing Date	09/13/00
First Named Inventor	Mark S. Knighton, et al.
Examiner Name	
Group Art Unit	2131
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DEC 19 2000**METHOD OF PAYMENT (check one)**

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

- ☒
- Charge Any Additional Fee Required Under 37CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Money Order ☐ Other**FEE CALCULATION (fees effective 10/01/96)****1. FILING FEE**

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
101	690	201	345	Utility filing fee	
106	310	206	155	Design filing fee	
107	480	207	240	Plant filing fee	
108	690	208	345	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$)

**2. CLAIMS**

Total Claims	Extra	Fee from below	Fee Paid
29	X		
5	X		

Multiple Dependent Claims

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	78	202	39	Independent claims in excess of 3	
104	270	204	135	Multiple Dependent claim	
109	78	209	39	Reissue independent claims over original patent	
110	18	210	9	Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

\*or number previously paid, if greater. For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEE**

Large Entity Code	Large Entity Fee (\$)	Small Entity Code	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920	112	920	Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	380	216	190	Extension for response within second month	
117	870	217	435	Extension for response within third month	
118	1,360	218	680	Extension for response within fourth month	
128	1,850	228	925	Extension for response within fifth month	
119	300	219	150	Notice of Appeal	
120	300	220	150	Filing a brief in support of an appeal	
121	260	221	130	Request for oral hearing	
138	1,360	138	1,360	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidably	
141	1,210	241	605	Petition to revive - unintentionally	
142	1,210	242	605	Utility issue fee (or reissue)	
143	430	243	215	Design issue fee	
144	580	244	290	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	240	126	240	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	760	246	380	Filing a submission after final rejection (37 CFR 1.129(a))	
149	760	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

SUBTOTAL (3) (\$)

\* Reduced by Basic Filing Fee Paid

**SUBMITTED BY**Typed or Printed Name Thomas M. Coester, Reg. No. 39,637Signature Thomas Coester

Date

12/11/2000**Complete (if applicable)**

Reg. Number

Deposit Account User ID

02-2666